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Contingency Planning

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Health Care Provider Summit For All DC Medicaid Providers And Their Billing Agents

Under the Executive Sponsorship of the Mayor of the District of Columbia, the Honorable Anthony A. Williams. Hosted by Deputy Mayor for Children, Youth, Families, and Elders, Carolyn N. Graham and Interim Senior Director of the Medical Assistance Administration, Wanda Tucker.



October 16, 2003

The law is clear: October 16, 2003 is the deadline for covered entities to comply with HIPAA's electronic transaction and code set provisions. After this date, covered entities, including health plans, may not conduct noncompliant transactions.

CMS has stated that it will not impose penalties on covered entities that deploy contingencies (in order to ensure the smooth flow of payments) if they have made a reasonable and diligent effort to become compliant and, in the case of health plans, to facilitate the compliance of their trading partners.*

*Reprinted from the CMS letter issued on July 24, 2003 entitled *Guidance on Compliance with HIPAA Transactions and Code Sets: After the October 16, 2003, Implementation Deadline*





What is considered a Good Faith effort?

- Active trading partner participation in testing
- Concerted and ongoing trading partner outreach and testing efforts on the part of the Health Plan
- Demonstrable and sustained progress toward HIPAA compliance

*Reprinted from the CMS letter issued on July 24, 2003 entitled *Guidance on Compliance with HIPAA Transactions and Code Sets: After the October 16, 2003, Implementation Deadline*





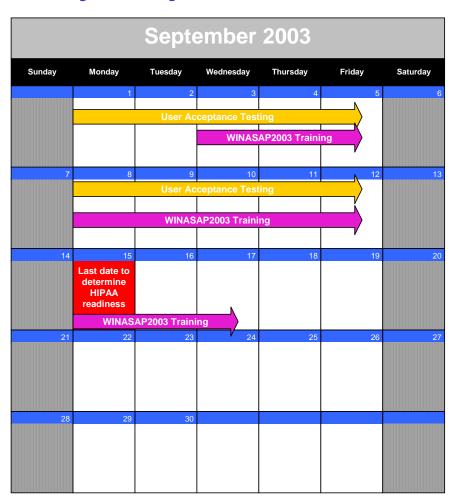
MAA outreach efforts to date include:

- HIPAA Newsletters
- Letters from Interim Deputy Director of MAA
- Association Presentations
- Provider Summit
- Training Sessions
- Testing
- Provider Welcome Packages





Only 44 days to HIPAA Transition!



	October 2003							
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday		
Firs			1	Last non- HIPAA Claims Accepted	MAA goes to HIPAA	4		
5	6	7	First 834s available to MCOs	9	10	11		
12	13	14	15	First 820s and 835s posted to IDEX	17	18		
19	20	21	22	23	24	25		
26	27	28	29	30	31			





Provider/Submitter HIPAA Readiness?

- Analysis of potential compliance failure points
 - Is your Practice Management System in place and tested?
 - Has your billing agent or clearinghouse tested with ACS EDI using your data?
 - Have you registered with ACS EDI to submit electronic claims?
- If you have answered 'NO' to any of the preceding ?s, you should consider Contingency Planning ...
 - Deploy an alternative solution(s)
 - Communicate your contingency plan to MAA





What if Provider/Submitter is not ready?

837 I, P, D	Providers can use WINASAP 2003, drop to paper, or contact ACS-EDI to discuss alternative transmission methods	
835	Providers can continue to receive paper remittance advices and retrieve electronic print image report of remittance advices (consistent with 835 data content) off IDEX mailbox	
270/271	Providers can continue to use the Eligibility Verification System or call Provider Inquiry	
276/277	Providers can continue to call Provider Inquiry	
278	Providers can continue to use the existing paper process	





What if MCO is not ready?

834	MCOs will be able to retrieve electronic print image of MCO roster off IDEX mailbox and/or continue to receive paper rosters
820	MCOs will be able to retrieve the electronic print image of the remittance advice off the IDEX mailbox and/or continue to receive paper





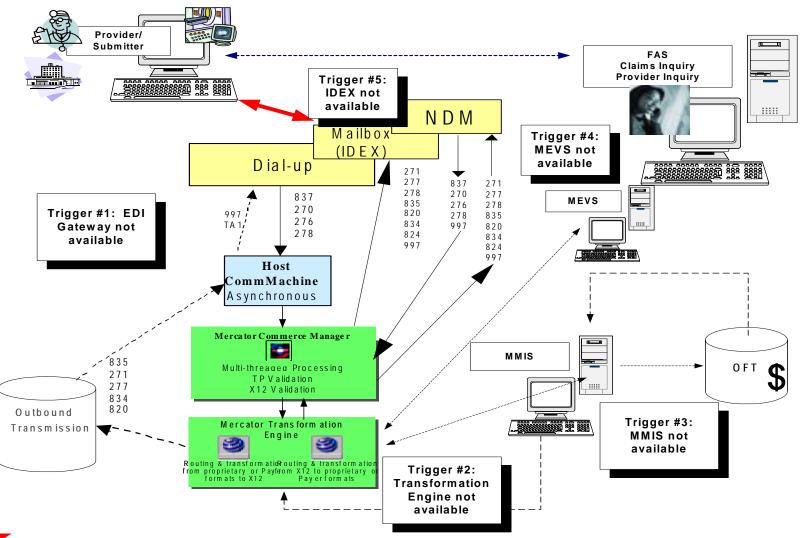
DC Medicaid Contingency Planning Efforts

- Analysis of potential compliance failure points
 - ACS-EDI Gateway
 - MMIS
 - ❖ IDEX
- Identification of issues that will trigger the contingency plan
- Deploy of an alternative solution(s)
- Define procedures to implement the contingency plan
 - Communication plan to inform the provider(s) of any alternative solution
 - Monitor plan to cure the noncompliance within a specified period





What if MAA is not ready?





What if MAA is not ready? (cont.)

Trigger	Transactions Impacted	Alternative Solution	
#1 – EDI Gateway not available	837, 270, 276, 278	➤ Ability to accept non-standard transactions	
#2 – EDI – Transformation Engine not available	837, 835, 834, 820	 Desktop versions of the Mercator translator maps ➤ Transfer files manually to MMIS ➤ Manually process responses back to provider/submitter 	
#3 – MMIS not available	837, 835, 834, 820, 278	➤ Additional FAS staff to key paper claims ➤ Providers utilize WINASAP2000 to generate proprietary claim format	
#4 – MEVS not available	270/271, 276/277	➤ Providers will be asked to continue to call Provider Inquiry	
#5 – IDEX not available	271, 277, 278, 835, 820, 834	 ▶835 - MAA will continue to send paper remittance advices and post electronic print image report of remittance advices ▶834 & 820 - MAA will continue to produce electronic print image of MCO roster report and/or send paper rosters ▶271 - Providers will be asked to continue to use the Eligibility Verification System or call Provider Inquiry ▶277 - Providers will be asked to continue to call Provider Inquiry ▶278 - Providers will be asked to continue the existing paper process 	



Next Steps:

- Maximize your participation in Submitter Testing
 - Contact ACS-EDI (866) 775-8563 to schedule your participation in Submitter Testing
- Ensure you are registered to submit electronically
 - Complete your EDI registration form and or authorization form
 - Return your registration forms to ACS EDI
- Register for WINASAP 2003 Training (September 3 17, 2003)
- ☐ Contact ACS, MAA's fiscal agent, at (202) 906-8311 to discuss contingency approaches if you meet the following criteria:
 - Electronic submitter
 - Will not be ready to submit HIPAA compliant 837s by the October 3rd transition date
 - Have explored all other contingency options!

